2010 ELECTION CYCLE Delbert Hosemenn SECRETARY OF STATE REPORT OF RE DISBURSEMEN Committee to Elect Scott Phillips Name of Committee Address Post Office Box 1007, Columbia, MS 39429 ampaign Finance Secretary of State Telephone (601) 736-9301 Fax (601) 736-7537 PATESPANE Treasurer Samantha Fortenberry Email kayleebugnate@yahoo.com Check here if above in different from previous report TYPE OF REPORT 

x November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).......Runoff Candidates

January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).................................Mandatory Termination Report (Candidate will no longer accept contributions or make campaign Required to terminate reporting

IMPORTANT

expenditures and has no outstanding campaign debt obligation)

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

## REPORTED CONTRIBUTIONS AND DISBURSEMENTS

İte	mized + Noi	n-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions \$1,2	250.00 +\$	305.00	\$1,555.00	\$ 10,529.99
Total amount of disbursements \$1,0	51.60 +\$	0.00	\$1,051.60	\$ 10,312.80
Total amount of cash on hand			\$ 217.19	1

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

November 16, 2010

Authority: Rafer to Miss. Code Ann. \$23-15-801 (1972) et. eeq. for statutory requirements. Permittes: Fallure to submit required reports, or fellure to submit reports in accordance with statutory deadlines, or fallure to submit valid reports shell result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §\$ 23-16-911 and \$13 (1972).

SEND FO: 1. Conditates for Statemids, State district, mutil-county and all legislative offices abould return form to Secretary of State, Elections Division, P. C. Box 135, Jackson, IS 39306 or fax to 601-369-1486 or 801-878-2619.

2. Candidates for countywide and county district offices should return forms to their county Circuit Clark.

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Name of Candidate or Committee	Scott Phillips			

Reporting period October 27, 2010 through November 16, 2010

## ITEMIZED RECEIPTS

A. Source: D Corporation D PAG (I Individual D Loan	(Mo., Day, Year)	Amount of each
6 Other (please specify) PLLC Full pame	(INO., Day, Year)	this period
McNeese & Hahn, PLLC	11 / 4 / 10	\$ 200.00
338 Church Street		\$
City, State, Zip Code		
Columbia, MS 39429		\$
Name of Employer (Required)		\$
Occupation (Required) Attorneys	Aggregate year-to-date	\$ 200.00
B. Source: Corporation C PAC C Individual C Loan	your-to-taite	The South Control of the Control
8 Other (please specify) PLLC	(Mo., Day, Year)	Amount of each receipt this period
Full name		
Pittman, Howdeshell, Hinton & Hightower, PLIC	11 / 12 / 10	\$ 200.00
Post Office Drawer 17138		\$
City, State, Zip Code		S
Hattiesburg, MS 39404-7138	-'-'-	*
Name of Employer (Required)	1, ,	\$
Occupation (Required)	''_	
Attorneys	Aggregate	\$ 200.00
C. Source: @ Corporation   D PAC   Mindividual   D Loan	year-to-date	200.00
Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt
Full name		this period
Thomas L. Wallace & Janette Wallace	11 / 9 /10	\$ 500.00
mening Address		
98 River Road		\$
Dity, State, Zip Code		\$
Columbia, MS 39429	-/-/-	•
T. L. Wallace Construction, Inc.	1_1	\$
Occupation (Required)	Aggregate	
Construction	year-to-date	\$ 500.00
Source: D Corporation D PAC D Individual D Loan		Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Mr. & Mrs. Bob Mixon	12 . 2	
alling Address	11 / 3 / 10	\$ 250.00
1179 Old HWY 24		\$
ty, State, Zip Code		
Sumrall, MS 39482 me of Employer (Required)	-/-/-	\$
Courtesy Motors	1	
coupation (Required)	''_	\$
Car Dealer and friend	Aggregate	\$ 250.05

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Name of Candidate	or Commit	tee _	Scott	Philli	06						
Reporting period_	October	27,	2010	through	November	16,	2010				

## ITEMIZED RECEIPTS

A Source: © Corporation © PAC @4ndividual © Loan © Other (please specify)	(Mo., Day, Year)	Amount of each receipt this period
Full name Ida Bryan	11/3/10	\$1,000.00
Meiling Address 206 Pine Lane	_'_'_	\$
City, State, Zip Code Batesville, MS 38606		s
Name of Employer (Required)		\$
Occupation (Raquired) Mother-in-law	Aggregate year-to-date	\$1,000.00
B. Source: D Corporation D PAC D Individual D Loan  D Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$
Mailing Address		\$
City, State, Zip Code		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$
C. Source: @ Corporation @ PAC @ Individual @ Loan  @ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$
Mailing Address		\$
City, State, Zip Code		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source:   Corporation PAC Individual Loan  Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
uli name		\$
faiting Address		\$
ity, State, Zip Code		\$
ame of Employer (Required)		\$
eccupation (Required)		\$

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Name of Candidate or Committee	Scott	Phillips					
Reporting period October 27,	2010	through November	16, 2	2010			

## ITEMIZED DISBURSEMENTS

A. Full name Standard Office Supply & Printing Co.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address Post Office Box 950	10/29/10	\$ 182.50
City, State, Zip Code Hattiesburg, MS 39403-0950	11/10/10	\$ 353.10
Purpose of Disbursement (Optional) Campaign Cards	Aggregate Year-to-date	\$1,241.80
8. Full name Columbian-Progress	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 318 Second Street	11 /10 /10	s 168.00
City, State, Zip Code Columbia, MS 39429		s
Purpose of Disbursement (Optional) Newspaper advertisement	Aggregate Year-to-date	\$ 420.00
C. Full name Hattiesburg Publishing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 126 Westover Drive	10 / 27 / 10	\$ 216.00
City, State, Zlp Code Hattiesburg, MS 39402	_/_/_	s
Purpose of Disbursement (Optional) Newspaper advertisement	Aggregate Year-to-date	\$ 216.00
D. Full name USPS	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address Columbia, Mississippi	11/12/10	\$ 44.00
City, State, Zip Code	11/17/10	s 88-00
Purpose of Disbursament (Optional) postage	Aggregate Year-to-date	s 132.00
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address		\$
City, State, Zip Code	_/_/_	5
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S
F. Pull name	Date (Mo., Day, Year)	Amount of each disbursement this period
Halling Address		5
City, State, Zip Code		S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	s